

# Indiana State Police Methamphetamine Laboratory Occurrence Report

This form complies with the statutory requirement set forth in IC 5-2-15-3.

Date: 09-30-2009

Address: CR250N @ CR500W

Case #: 16F19216

County: Cass

## Type of Laboratory Seizure (check one)

- ☐ Operational Lab  
☒ Chemical/Glassware/Equipment (only)  
☐ Dumpsite (only)

## Seizure Location (check all that apply)

- ☐ Residence  
☐ Outbuilding  
☐ Vehicle  
☐ Hotel/Motel  
☒ Open - No Structure  
☐ Other: \_\_\_\_\_

## Items Found: Location (bedroom, kitchen, open air, etc)

(check all that apply)

- ☐ Lithium/Ammonia Reaction(s): N/A  
☐ Red Phosphorous/Iodine Reaction(s): N/A  
☐ Flammable Solvents: N/A  
☐ Water Reactive Metal (Lithium): N/A  
☐ Anhydrous Ammonia: N/A  
☒ Hydrochloric Acid Gas Generator(s): side ditch  
☐ Corrosive Acid: N/A  
☐ Corrosive Base: \_\_\_\_\_  
☐ Other (item and location): N/A

## Child under age 18 discovered (check one)

- ☐ Yes \_\_\_\_\_ (number present)  
☒ No

\*If yes, fax report to Child Protective Services

## Investigative Information

- ☐ Ephedrine/Pseudoephedrine Tracking Log  
☐ Retail/Merchant Tip  
☒ Other: Civilian found lab

## This report is to be faxed to the following agencies that serve the location:

Fire Department: Cass County

Fax: (574)722-3842

Health Department: Cass County

Fax: (574)753-7039

Child Protection Service: N/A

Fax: N/A

For further information regarding this methamphetamine laboratory, contact

Investigating Officer: Joshua Maller

Phone (765) 473-6666

\*\* This form is to be faxed to the Fire Department, Health Department and/or Child Protective Services Department listed within 24 hours of scene processing.

\*\*\* This form is to be included with the case file, and a copy sent to the Clandestine Laboratory Team Leader for retention.